

LIFEPAK[®] 1000

defibrillator



Product Brochure

LIFEPAK 1000 defibrillator

Simple. Flexible. Powerful.

Not every cardiac emergency is the same. Neither is every responder. Your world demands flexibility—and that's exactly what the LIFEPAK 1000 defibrillator from Stryker delivers.



The right tool at the right time. Every time.

The rugged LIFEPAK 1000 defibrillator is an easy-to-use automated external defibrillator (AED) from the leader in defibrillation technology. But it's also a defibrillator powerful and adaptable enough for professional responders, featuring advanced capabilities that can help improve lifesaving outcomes and help speed the transition of cardiac patients to the next critical level of care.

For every trained responder, the opportunity to make a difference.

The LIFEPAK 1000 combines the simplicity of an AED with clear guidance, including on-screen and audio prompts with the flexibility of manual mode operation when indicated. Flexible setup options allow on-screen graphics for the basic rescuer or ECG display and access to manual mode for the more advanced rescuer. This powerful AED combines basic guidance with advanced operational control, enabling responders to deliver fast, appropriate treatment.

With the LIFEPAK 1000, BLS-trained responders have the device they need, with powerful defibrillation—up to 360 joules—long battery life, and a rugged construction that can stand up to severe environments.

When an ALS-trained professional does step in—either as a first responder or in transition to advanced care—the touch of a button puts the 1000 into manual override, with greater control over when to analyze and shock. Its ECG capabilities provide critical information to guide your protocol and deliver timely treatment, and the 1000 also stores this vital data for use in post-event review.

The right tool can make all the difference.

Rugged yet easy to use, the LIFEPAK 1000 defibrillator can make the lifesaving difference for victims of sudden cardiac arrest.

Rugged, vehicle-friendly construction

- Rigorously drop-tested and includes protective case and bumpers for durability in the harshest environments.
- Designed to ride along in vehicle without damage from continuous vibrations and other movement.

Powerful and easy to use

- Loud voice prompts and on-screen graphics provide clear guidance on applying electrodes and initiating a shock to help ensure user confidence.
- Escalating energy to 360 Joules, biphasic, for difficult-to-defibrillate patients.
- Provides flexible power options - choose between a rechargeable or non-rechargeable battery.

Clinically advanced, with robust features

- Exclusive cprMAX™ Technology minimizes CPR interruptions by allowing responders to perform pre-shock CPR while the AED charges.
- Optional 3-lead ECG monitoring available when needed.
- Includes features such as a CPR countdown timer, ECG capability, a shock counter, and programmable settings – all on a large, easy-to-read LCD screen.

Compatibility and connectivity

- Compatibility with other LIFEPAK defibrillators and monitors help speed the transition to the next level of care. Post-event patient and performance data can be easily viewed, analyzed and managed with CODE-STAT data review software – helping to target training needs.



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cprMAX Technology

The 1000 features our exclusive cprMAX technology, which gives you the flexibility to choose CPR settings that best accommodate your patient and CPR protocol requirements. The pre-shock CPR option allows adjustment of the CPR interval prior to the first shock, minimizing pre-shock pauses pre-shock pauses by allowing providers to continue compressions while the AED charges.

LIFEPAK TOUGH™

Built for the harsh environments, the LIFEPAK 1000 is the toughest, most durable AED from Stryker. The device itself withstands rigorous drop-testing from any angle, and is enclosed in a highly protective case with bumpers. In addition, the 1000 has received an IP55 rating—for dust and water resistance.

360 Joules

Like every LIFEPAK defibrillator from Stryker, the 1000 can escalate energy up to 360J. Studies show that for difficult-to-defibrillate patients, repeating 200J shocks yields significantly lower VF termination rates.^{2,3} And the 2010/2015 AHA Guidelines note that rescuers may consider using escalating energy up to 360J if initial shocks at a lower dose fail.⁴

ALS Hand-off

The LIFEPAK 1000 is simple to use for trained responders, but it also provides an easy, highly compatible transition to ALS care teams. The shock counter on the 1000 gives next level care teams insight into treatment provided. It has an available 3-lead ECG. And its electrodes are the same ones used on LIFEPAK ALS monitors—the brand of choice for more EMS teams across the country.



LIFEPAK 1000 defibrillator

ProCare® Services

When lives are at stake, you need someone who takes a proactive approach to keeping your equipment up and running.

Imagine having someone dedicated to managing your equipment, who truly understands the intricacies of emergency care. We'll make sure your lifesaving devices and back-saving equipment are ready when you need them. With ProCare Service, you can count on trusted experts dedicated to caring for your equipment, so you can focus on what truly matters – saving lives.

ProCare plans include:

- Stryker original equipment manufacturer parts
- Labor and travel expenses
- Unlimited repairs to restore equipment to manufacturer specifications
- Responsive support from your field service representative
- Option to include preventive maintenance inspections
- Option to include battery service and replacement

Contact your local Stryker representative today to learn more.

Flex Financial Program

Our financial programs provide a range of smart alternatives designed to fit your organization's needs. We offer flexibility beyond a cash purchase with payment structures that can be customized to meet budgetary needs and help to build long-term financial stability. Contact your Stryker representative for more information.



LIFEPAK 1000 DEFIBRILLATOR

BRIEF SUMMARY OF INDICATIONS AND IMPORTANT SAFETY INFORMATION

INDICATIONS FOR USE: DEFIBRILLATION is a recognized means of terminating certain potentially fatal arrhythmias, such as ventricular fibrillation and symptomatic ventricular tachycardia. LIFEPAK 1000 is to be used in AED mode only on patients who are in cardiopulmonary arrest. The patient must be unresponsive, not breathing normally, and showing no signs of circulation. LIFEPAK 1000 may be used with standard defibrillation pads only on adults and children who are 8 years old or more or who weigh more than 25 kg (55 lbs). LIFEPAK 1000 may be used on children who are less than 8 years old or weigh less than 25 kg (55 lbs) with Infant/Child Reduced Energy Defibrillation Electrodes. ECG MONITORING is for use on conscious and unconscious patients of all ages for the purpose of ECG rhythm recognition and heart rate monitoring. **CONTRAINDICATIONS:** None

OPERATOR CONSIDERATIONS: LIFEPAK 1000 requires operator interaction to defibrillate patient. It is intended for use by personnel who are authorized by a physician or medical director and have, at a minimum, the following skills and training: CPR training, defibrillator training equivalent to that recommended by American Heart Association, and training in use of defibrillator. LIFEPAK 1000 is intended for use in hospital and out-of-hospital environments. Manual mode is intended for use by personnel trained in ECG recognition who want to use defibrillator to deliver a shock independent of AED mode. Operator has control over charging and delivery of shocks. ECG mode provides a nondiagnostic ECG display and is intended for use by personnel trained in ECG recognition to allow for rhythm and heart rate monitoring using standard ECG electrodes. When in ECG mode, the defibrillator's shock capability is disabled; however, LIFEPAK 1000 continues to analyze patient's ECG for potentially shockable rhythm.

GENERAL/DEFIBRILLATION WARNINGS. Shock Hazards: LIFEPAK 1000 delivers up to 360 joules of electrical energy. Unless properly used, this electrical energy may cause serious injury or death. Do not attempt to operate unless thoroughly familiar with operating instructions and function of all controls, indicators, connections, and accessories. • Clear everyone away from contact with patient, bed, and other conductive material before discharging defibrillator. • When discharging defibrillator, do not touch electrodes. • Do not immerse defibrillator in water or other fluids. Avoid spilling fluids on device or accessories. • Do not disassemble defibrillator or its batteries. Contact authorized service personnel for repair. **Possible skin burns and ineffective energy delivery:** Dried out or damaged electrodes may cause electrical arcing and patient skin burns during defibrillation. Do not use electrodes that have been removed from foil package for >24 hours or expired electrodes. Check that electrode adhesive is intact and undamaged. **Possible misinterpretation of ECG data:** Do not analyze in a moving vehicle or move the AED during analysis. Motion artifact may affect ECG signal resulting in inappropriate shock or no shock advised message. Motion detection may delay analysis. Stop vehicle. • Do not touch the patient or the AED during analysis. **Excessive Energy Delivery (AED mode):** Do not use Pediatric QUIK-COMBO electrodes; these electrodes do not attenuate the energy delivery by LIFEPAK 1000. **Implanted electrical devices:** Defibrillation may interfere with implanted devices and cause them to malfunction. Place therapy electrodes away from implanted devices if possible. **Possible defibrillator shutdown:** Always have access to spare, fully-charged, properly maintained battery to avoid possible device shutdown without warning. Replace battery when LIFEPAK 1000 displays warning of REPLACE BATTERY. **Possible device failure:** Do not modify LIFEPAK 1000 or its batteries. **Possible explosion, fire, noxious gas or burns:** Do not use device in presence of flammable gases or anesthetics. Use care when operating close to oxygen sources. Turn off gas source or move source away from patient during defibrillation. **Possible electrical interference or improper device performance:** Use only parts and accessories specified by Physio-Control or Stryker. Using other manufacturers' accessories may affect performance of device or equipment in close proximity and may invalidate safety agency certification. • Defibrillator may cause electromagnetic interference (EMI) especially during charge and energy transfers which may affect performance of equipment operating in close proximity. • Equipment operating in close proximity may emit strong EMI or radio frequency interference (RFI) which could affect performance of device. Recommended distances of equipment provided in Operating Instructions. **Safety risk and possible equipment damage.** Keep AED away from magnetic resonance imaging (MRI) equipment as it is unsafe. **ECG MONITORING (ECG mode) WARNINGS. Possible delay in therapy:** Do not attempt to connect 3-wire ECG cable to QUIK-COMBO therapy cable or any other AED. ECG cable is functional only with LIFEPAK 1000. • **Possible misinterpretation of ECG data:** Frequency response of screen intended only for basic ECG rhythm identification; it does not provide resolution required for pacemaker pulse visibility, accurate measurements, such as QRS duration, and ST segment interpretation. For such purposes, use ECG monitors with appropriate frequency response.

GENERAL CAUTION: Possible equipment damage: Before using LIFEPAK 1000 disconnect all equipment that is not defibrillator-protected from patient.

U.S. Federal law restricts this device to sale by or on the order of a physician.

Please consult Operating Instructions at www.physio-control.com or call 800.442.1142 for complete list of indications, contraindications, warnings, cautions, potential adverse events, safety and effectiveness data, instructions for use and other important information.

References

1. Christenson J, et al. Chest Compression Fraction Determines Survival in Patients with Out-of-Hospital Ventricular Fibrillation. *Circulation*. 2009; 120: 1241-1247.
2. Stiell, I., et al. (2007). "The BIPHASIC Trial: A randomized comparison of fixed lower versus escalating higher energy levels for defibrillation in out-of-hospital cardiac arrest." *Circulation*. 115: 1511-1517.
3. Koster RW, et al., Recurrent ventricular fibrillation during advanced life support care of patients with prehospital cardiac arrest. *Resuscitation*. 2008; 78: 252-257.
4. 2010 American Heart Association guidelines for cardiopulmonary resuscitation and emergency cardiac care science. *Circulation*. 2010.

All claims valid as of July 2019.

For further information, please contact Stryker at 800 442 1142 (U.S.), 800 668 8323 (Canada) or visit our website at strykeremergencycare.com

Emergency Care

This document is intended solely for the use of healthcare professionals. A healthcare professional must always rely on his or her own professional clinical judgment when deciding whether to use a particular product when treating a particular patient. Stryker does not dispense medical advice and recommends that healthcare professionals be trained in the use of any particular product before using it.

The information presented is intended to demonstrate Stryker's product offerings. A healthcare professional must always refer to operating instructions for complete directions for use indications, contraindications, warnings, cautions, and potential adverse events, before using any of Stryker's products. Products may not be available in all markets because product availability is subject to the regulatory and/or medical practices in individual markets. Please contact your representative if you have questions about the availability of Stryker's products in your area. Specifications subject to change without notice.

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